

Application Form – Discharge to Groundwater

Local Government (Water Pollution) Acts, 1977 & 1990

APPLICATION FOR A LICENCE TO DISCHARGE TRADE AND/ OR DOMESTIC WASTE WATER TO GROUNDWATER

Your completed application accompanied by all relevant information and payment is to be sent to the following address:

Address:	Discharge Licensing,
	Environment Section,
	Cavan County Council,
	17 Farnham Street,
	Co. Cavan
Phone:	049 4378486

PART I - Section 1

A. Guidance on Applying for a Discharge Licence - Groundwaters

Any person who intends to discharge domestic waste water or trade effluent to groundwater must attain permission to do so from either the Local Authority or the Environmental Protection Agency (EPA) before the discharge is commenced.

Where the discharge is licensable by the Local Authority, this Application Form is to be completed and submitted to the Local Authority.

The Applicant is requested to read the "Guidance on Applying for a Discharge Licence - Groundwaters" before completing this licence application form.

B. Completing the Application Form

Guidance on what information is to be included in each Part of the Application Form is provided in the "Guidance on Applying for a Discharge Licence - Groundwaters".

The Applicant is asked to contact the Licensing Authority in the event that:

- o they are unsure as to whether the discharge is licensable by the Local Authority or the EPA
- o they are having difficulty in providing all the information required in the application form
- o they are unsure as to what information they are to provide in the form
- o they are unsure as to where to source the information required in the form
- o they require any information or guidance on filling out the form

The Licensing Authority WILL NOT be able to process an incomplete application.

Where multiple discharges are proposed, the applicant for a discharge licence must first contact the Licensing Authority for advice on whether one application form will suffice or whether multiple forms need to be submitted.

Additional Sheets

Where any part of the Application Form does not afford sufficient space to provide the required information, the Applicant should attach additional sheets to the form containing such information.

The additional sheets should be cross-referenced to the appropriate section in the Application Form. Mark each sheet with the name of the Applicant and the name of the premises from which the discharge is generated and indicate the section and part of the Application Form to which the additional sheets relate. An example of an Additional Sheet cross reference is provided in "Guidance on Applying for a Discharge Licence - Groundwaters".

Request for Further Information

The Licensing Authority is entitled under Section 7(3) of the *Local Government (Water Pollution) Regulations, 1978* to request the Applicant to submit additional information that the Licensing Authority deems necessary for the consideration of an application for a discharge licence.

Where additional information is not provided by the Applicant within a three month period of receiving such a request then the Licensing Authority may carry out the necessary investigations to acquire the information, the cost of which is to be borne by the Applicant. Alternatively the Licensing Authority may proceed to make a determination on the application in the absence of such information.

C. Signatures of the Applicant & Agent
Identify the class of discharge to which this application pertains.
I hereby make an application for a licence to discharge* effluent to groundwater under the Local Government (Water Pollution) Act 1977 in respect of the particulars included in this application on behalf of(insert name of the Applicant).
*indicate whether trade or domestic or both
Where this application is made by an Agent on behalf of an Applicant, the signature of the Applicant must be provided below confirming the authorisation of the Agent to apply for a licence on their behalf:
I hereby authorise (name of Agent) to apply for a discharge licence on
behalf of (name of Applicant).
Signed: Date: (provide signature of Applicant)
Name (in print):
I hereby declare that I am fully aware of my responsibilities to implement the conditions of any licence granted on the basis of this application and acknowledge that I may be subject to criminal liability whereby the terms of the licence are not complied with.
Signed: Date:
(provide signature of Applicant)
Name (in print):
Refer to the "Guidance on Applying for a Discharge Licence - Groundwaters" for definitions of the Applicant and the Agent.

PART I - Section 2

A. Disclosure of Information

The Freedom of Information Act, 1997 (as amended) states that every person has a right to access any record held by a public body. This includes discharge licenses (and associated applications) held by the Local Authority. The Local Authority may refuse to provide access to records held by them where the information was provided to the Local Authority with the understanding that it is to be treated as confidential. Circumstances under which confidentiality may apply include where information submitted in the application contains commercially sensitive information or matters of National security.

The Applicant is requested to <u>identify all information</u> submitted with the application which is to be treated as confidential and is requested to identify the grounds on which the information may be categorised as confidential.

B. False or Misleading Information

It is an offence under the *Local Government (Water Pollution) Act, 1977* to knowingly submit false or misleading information in the licence application and an Applicant is liable to a fine on summary conviction of such an offence.

Please provide signature of the authorised representatives of the Applicant and where appropriate the Agent confirming that all the information submitted in this application is correct and also that they have made themselves aware of the provisions of the Freedom of Information Act.

I/we hereby declare that I/we have made myself/ourselves aware of the provisions of the Freedom of Information Act and that I/we understand that there is a legal obligation on the Local Authority to make this discharge licence application available for inspection by third parties.

I/We hereby declare that to the best of my/our knowledge all of the information provided in this application is true and correct.

Signed:	Date:	
(provide signature of the Applicant)		
Name (in print):		
Signed:	Date:	
(provide signature of the Agent)		
Name (in print):		

PART II – Section 1

A. Contact Details – Applicant							
A. (i) Provide contact details for the Applicant below							
The Applicant is:	An Individual						
Please mark the box with an 'X'	A Group of Individuals						
	A Corporate Body						
Name (Principal Contact)*							
Address							
Phone Number (day)							
Phone Number (night)							
Fax							
e-mail							
	s a group of individuals or a corporate body, provide the name						
to a licence granted by the	ne principal contact for the purpose of correspondence relating						
to a needee granted by th	it fictisfing authority.						
A (ii) Where the Applicant is an Individual provide the following details:							
A. (ii)Where the	Applicant is an Individual provide the following details:						
	Applicant is an Individual provide the following details:						
Relationship to the premises from which it	Applicant is an Individual provide the following details: Owner/occupier						
Relationship to the							
Relationship to the premises from which it is proposed to	Owner/occupier						
Relationship to the premises from which it is proposed to discharge Please mark the box with	Owner/occupier Landowner						
Relationship to the premises from which it is proposed to discharge Please mark the box with	Owner/occupier Landowner Responsible for treatment facility						
Relationship to the premises from which it is proposed to discharge Please mark the box with an 'X'	Owner/occupier Landowner Responsible for treatment facility						
Relationship to the premises from which it is proposed to discharge Please mark the box with an 'X'	Owner/occupier Landowner Responsible for treatment facility Other (please specify):						
Relationship to the premises from which it is proposed to discharge Please mark the box with an 'X' A. (iii) Where the App	Owner/occupier Landowner Responsible for treatment facility Other (please specify): licant is a Group of Individuals provide the following details:						
Relationship to the premises from which it is proposed to discharge Please mark the box with an 'X' A. (iii) Where the App	Owner/occupier Landowner Responsible for treatment facility Other (please specify): licant is a Group of Individuals provide the following details: Management Company						
Relationship to the premises from which it is proposed to discharge Please mark the box with an 'X' A. (iii) Where the App Type of Group	Owner/occupier Landowner Responsible for treatment facility Other (please specify): licant is a Group of Individuals provide the following details: Management Company Residents Association						

A. (iv) Where the Applicant is a Corporate Body provide the following details:				
Type of Corporate Body	Limited Company			
	Public Limited Company			
Please mark the box with an 'X'	Sole Trader			
	Co-operative			
	Partnership			
	Other (please specify):			
Certificate of Incorporation	tion must be included with the application listing the names of			
	B. Contact Details – Agent			
B. Where an Agent is	making this application on behalf of an Applicant the Agent's contact details must be provided			
Name				
Address				
Phone Number (day)				
Phone Number (night)				
Fax				
e-mail				
Relationship to the Applicant e.g. employee, consultant, partner.				

PART II – Section 2

A. Site Details														
A. (i) Provide details b	elow of the	site	/ac	ctiv	ity f	ron	n wł	nich it is pr	opo	sed t	o di	isch	arge	e.
Name of Site														
(where applicable)														
Address														
								1						
Site location (Co-ordinates)	Easting							Northing						
Is the site an existing development or a new development? Please mark correct boxes with an 'X'		Exis New		5										
Is there any existing discharge license(s) granted in relation to the site? Please mark correct boxes with an 'X'		Yes Reference Number: No Reference Number :												
Is planning permission granted for any proposed / existing development at the site? Please mark correct boxes with an 'X'		Granted Reference Number : Pending Not Applied For												
Have copies of the following maps / drawings been included? Please mark correct boxes with an 'X'	Refer to	Non	Lay Dra e of	out ina the	: Ma ge S e abo	p yste ove ppl	ying	Drawings for a Disch					ıans	

e sector(s) from wh	ich the proposed discharge will be generated	ł.				
i	Please mark the box with an X as appropriate	X				
Accommodation	Household / Holiday Home					
	Hotel / Guesthouse / B&B					
	Caravan Park / Camp Site					
	Nursing Home					
Education	Non-residential facility					
	Boarding School					
	College / University					
Commercial /	Office					
Service	Hairdresser / Beauty Salon					
	Doctor Surgery					
	Dentist					
	Launderettes and Dry Cleaners					
	Petrol Station					
	Hospital					
	Churches, Monasteries etc.					
	Amenities (golf course, sport facilities					
	etc.)					
Food & Drink	Public House (with or without food					
	preparation)					
	Restaurant / Café / Take Away					
Transport	Airport					
_	Train station					
	Bus station					
Industrial	Dry process industry without canteen					
	Dry process industry with canteen where					
	food is prepared					
	Chemicals industry					
	Wood, paper, textiles and leather					
	Food and drink					
	Minerals and other materials					
	Energy					
	Metals					
	Mineral fibres and glass					
	Fossil fuels					
	Cement manufacture					
	Waste					
	Surface coatings					
Other (Please	e.g. tourism- heritage centre, quarry					
specify)	activities.					

	A. (iii) Activities Carried Out on Site.			
Provide details of the act	tivities carried out on site. Where this involves a process,			
	he process. In particular indicate where domestic waste water /			
trade effluent is generate				
Provide additional sheets where necessary.				
Process Materials &	Where applicable, complete Appendix A and Appendix B of			
Waste Disposal	this form.			

PART III – Section 1

A. Effluent Details					
PART III - Section 1 A i	s to be completed by All Applicants.				
Type of effluent Please mark correct boxes with an 'X'	Domestic Waste water Only Trade Effluent Only Both Domestic and Trade Effluent				
Indicate the type of discharge to which this application relates. Please mark correct boxes with an 'X'	New Discharge Existing Discharge				
Domestic Waste water only (if relevant)	Population Equivalent (p.e.) :				
	Expected Dry Weather Flow (DWF) m ³ /day. Provide details of how the P.E. & DWF were calculated.				
Trade Effluent only or Domestic & Trade (if relevant)	Normal volume of effluent discharged per day is m ³ /day.				
	Max. volume of effluent discharged in one day is m ³ /day.				
	Max. volume of effluent discharged per hour is m³/hour.				
Provide details of how th	e trade effluent flows are calculated.				
Effluent Characteristics.	Complete Appendix C and Appendix D of this form.				
	Provide additional sheets where necessary.				

B. Effluent Details							
PART III – Section 1 B is to be completed by All Applicants.							
Provide additional sheets where necessary.							
Discharge Variability	Briefly identify whether there is likely to be variability in the discharge flow or characteristics e.g. due to process changes, due to seasonal variation, due to diurnal changes etc.						
	Where the discharge shows seasonal or other variation, please provide details of flow volumes and times of discharge.						
	Also provide details of varying effluent characteristics in Appendix C and Appendix D.						
Date of Discharge	Date:						
	Identify the proposed date for the commencement of the discharge or where it is an existing discharge identify the date on which the discharge commenced.						
Fats, Oils and Grease (FOG) (if relevant)	Provide details of control measures proposed for the removal of FOG from the effluent prior to discharge. Provide technical data sheets for any equipment proposed.						
Food Waste (if relevant)	Provide details of provisions for source segregation and disposal of food waste.						
Other Discharges	Provide particulars of any other discharges from the premises (e.g. storm water).						
Water Supply	Provide details of the source of water that will form part of the discharge e.g. mains, borehole, river etc.						
	The estimated volume of water used per day is m^3/day .						
Other Effluent Details	You may be required to furnish such other particulars as the Licensing Authority may reasonably require for consideration of the application e.g. effluent toxicity testing, bioaccumulation testing, biodegradation testing.						

PART III – Section 2

A. Effluent Treatment							
<u>PART III – Section 2 A</u> is to be completed where the effluent is to be treated prior to							
discharge.	-						
Operator of Treatment	Where the treatment system is to be maintained and operated						
System (where	by a third part please provide the following:						
relevant)	Contact Name						
	Company Name						
	Address						
	Phone Number (day)						
	Phone Number (night)						
	Fax						
	e-mail						
	Registered Company						
	Details						
Waste Water		existing / proposed effluent treatment					
Treatment System	system. Provide copies of the treatment system process drawings.						
Overview	Provide details of performance standards.						
3 (C1 (12))	Periorial						
	Provide additional sheets where necessary.						
Is the Discharge a							
Direct Discharge or an	Direct Discharge						
Indirect Discharge?							
	Indirect Discharge	via Percolation Area, Soakage Pit,					
	Filter System or Other Method						
	j ,						
Please place an 'X' where	Where discharge is via a	percolation area, soakage pit, filter					
appropriate	_	and or other method provide details					
	-	ction of same and include such					
	drawings as may be relev						
Hydraulic Loading	g and a g						
Trydraune Louding	Effluent Discharge Rate (n	naximum) is m³/day.					
		iii / day.					
	Recharge Rate is	m ³ /day.					
		, ,					
	Hydraulic loading rate (vo	lumetric flow rate over a given					
	percolation area) is	m^3/day .					
	percondition area, is	m / auj ·					
	<u> </u>						

B. Effluent Treatment								
PART III – Section 2 B is to be completed where the effluent is to be treated prior to								
discharge.								
Provide additional sheets	where necessary.							
Treatment System	Provide details of the proposals for the treatment system							
Maintenance	maintenance including frequency of inspection and de-sludging.							
DI (E.)								
Plant Failure	Identify how any failure of the treatment system will be detected.							
CL L								
Sludge	Provide details of proposals for dealing with sludge.							

PART III – Section 3

A. Effluent Monitoring														
PART III – Section 3 A is to be completed by All Applicants.														
Provide details of the monitoring proposed for the effluent discharge														
Provide additional sheets	ditional sheets where necessary.													
Monitoring the		Provide details of any proposals to monitor the discharge e.g.												
Discharge.				•	<i>,</i> 1	1					0			
	o Para	met	ers 1	to be	e an	alys	ed;							
						•	ĺ							
	o Mor	itor	ing	prog	gran	nme	•							
	Б.	•1	C			1.		1		1				
	o Deta	aiis (or ar	ıy sa	amp	ling	equ	ipment to b	e us	ea.				
Location of sampling														
point(s) (Co-ordinates)	Easting							Northing						
Effluent Flow	Provide o	letai	le o	f an	v nr	ono	calc	to monitor t	he d	lisch	aro	a flo	XX7	
Monitoring	1 TOVIGE C	ictai	15 0	ı an	y Pr	opo	sais	to monitor t	iic c	11301	iaig	C IIC	, vv .	
Withing														
Licensing Authority	Provide a	ı des	crip	tion	of	how	the	Licensing A	Auth	orit	y wi	ill bo	e	
Monitoring			_					n order to tal			-			
	indicate t	he p	oin	t at v	whic	ch si	uch	samples may	y be	tak	en e	.g. l	ast	
	manhole	befo	ore c	outfa	all. (Pro	vide	e grid refere	nce	belo	w).			
Location of Licensins														
Location of Licensing														
Authority sampling	Easting							Northing						
point(s) (Co-ordinates)														
(Co-ordinates)														

B. Pollution Control								
PART III – Section 3 B i	s to be completed by All A	pplicants.						
PART III – Section 3 B is to be completed by All Applicants. Provide details of any pollution control measures proposed. Provide additional sheets where necessary.								
Provide additional sheets	where necessary.							
Accidental Discharges	Provide details of arrangen	nents to prevent accidental discharges.						
Provide below, details of to respond to unexpected		ntact persons and facilities available						
Emergency Response	Contact Name							
	Phone Number (day)							
	Phone Number (night)							
	Provide details of any eme	rgency procedure.						
Environmental	Is there an Environmental	Management Plan in place in respect						
Environmental Management Plan	Is there an Environmental of the site?	Management Plan in place in respect						
Management Plan	of the site?	Management Plan in place in respect						
		Management Plan in place in respect						
Management Plan Please put an 'X' in the	of the site?	Management Plan in place in respect						

PART IV – Section 1

	A. General Details
Identify why it is not feasible to discharge to	
sewer.	
Provide details of the	
newspaper notice.	Name of Publication
	Date of Print
	Please include one original plus the required copies of the notice.

PART IV – Section 2

A	A. Aquifer Characteristics & Receptor Details													
Name of Receiving Water (Waterbody code)														
Location of Discharge (Co-ordinates)	Easting							Northing						
Add additional rows wh All discharge locations		•	l cle	early	y on	OS	S Ma	ap.						
Name of River Basin District	Provide the is located:	e na	me	of tl	he R	iveı	· Ba	sin District i	n w	hich	the	dise	char	ge
Water Framework Directive Waterbody Status	Please put	Please put an 'X' in the appropriate box No Status Poor Good												
Designation*	* Note: W Natura 20 impact on Impact Starequired b	An S An S Non here 00 st a ne attem y Ca abita	SAC SPA ne or the ite (earb ent)	C, si A, si f the SAC y SAC mu cil L	tte co	oode: oove rge v SPA (SPA csure)	is lo A), o A, ai bmii	cated within the bound or where a din Appropriated with this /43/EEC on and Flor	the ischa te A s app	bou arge ssses volice	unda e is l sme ation serv	ıry o likel nt (1 ı as	f a y to Natu	

Is GWDTE Located	Please put an 'X' in the appropriate box
within 1km of the	
Discharge?	Yes
	No.
	No No
Nearby Surface	Show the location of nearby surface waters e.g. rivers, streams,
Water Features	lakes and field drainage ditches within 250m of the discharge on a
	map.
Drinking Water	Provide the name of Public/Group Water Supply Schemes within
Abstractions	1km of the discharge and mark their location on a map.
	M 1 d 1 d C 1 d H 1 d 1 d 1 250 Cd
	Mark the location of any domestic wells located within 250m of the discharge on a map.
	Is the discharge located within the Zone of Contribution or Source
	Protection Zone of a Groundwater Protection Scheme?
	1 Totection Zone of a Groundwater 1 Totection Scheme:
	Yes
	No No
	None Delineated
	If Yes, provide copy of report and maps.
Soil & Bedrock	If I cos, provide copy of report and maps.
Son w Bear och	Soil type
	Subsoil type
	Bedrock Type
	Karst features
	Provide copies of reports and maps as relevant.
Aquifer Category	Identify Aquifer Category
and Vulnerability	
·	Identify Vulnerability Rating
	Provide copies of reports and maps as relevant.
Topography &	Identify slope of land at the point of discharge i.e. Steep (>1:5),
Groundwater Flow	Shallow (1:5-1:20), or Relatively Flat (<1:20)
Direction	Mark aroundwater flow direction on a man
Donth to Water	Mark groundwater flow direction on a map. Where available provide depth to water table:
Depth to Water Table	Where available provide depth to water table: m
	Applying for a Discharge Licence - Groundwaters" for sources
of information.	and the state of t

Receiving Water Parameter Result (mean parameter) Background Total Dissolved Solids mg/l Concentrations. pH (pH units) Colour	n)
Concentrations. pH (pH units) Colour	
Colour	
Temperature °C	
Electrical Conductivity μS/cm	
Total Hardness mg/l CaCO ₃	
Total Ammonia as mg/l NH ₄ – N	
Un-ionised Ammonia as mg/l N	
Molybdate Reactive Phosphorus as	
(unfiltered MRP)	
Total Phosphorus as mg/l P	
Nitrite as mg/l NO ₂ – N	
Nitrate as mg/l NO ₃ – N	
Total Nitrogen mg/l N	
Total organic carbon (TOC)	
Chloride mg/l	
Sulphate mg/l	
Sodium mg/l	
Magnesium μg/l	
Manganese μg/l	
Iron μg/l	
Escherichia coli (E.coli) number/100 ml	
Total Coliforms number/100 ml	
Cryptosproridium number/100 ml	

Refer to "Guidance on Applying for a Discharge Licence - Groundwaters" for guidance on reporting monitoring data and on sampling.

PART IV – Section 3

A. Impact of Discharge – Site Suitability/Characterisation							
Tier 1 Assessment	A Tier 1 Assessment must be carried out in support of all applications to discharge to groundwater.						
	 A Tier 2 Assessment must be carried out for the following: Where the proposed discharge is an input greater than 5 m³/d and less than or equal to 20 m³/d of domestic waste water associated with OSWTS and ICWs; 						
	 Where the proposed discharge is a trade effluent (moderate risk); 						
Tier 2 Assessment	 Where the Tier 1 Assessment indicates uncertainty about the risk of impact to groundwaters, the Applicant must proceed to a Tier 2 Assessment. 						
	Note that an Applicant may be requested to conduct a Tier 2 Assessment where the Licensing Authority, following a risk screening of the discharge, deems that there is a moderate risk of impact to groundwaters from the discharge.						
	A Tier 3 Assessment must be carried out for applications to discharge to groundwater that relate to the following activities: • Inputs greater than 20 m³/d of domestic waste water;						
	Discharges from Landfills;						
	 Where the proposed discharge is a trade effluent (high risk) 						
Tier 3 Assessment	 Where the Tier 1 and Tier 2 Assessments indicate uncertainty about the risk of impact to groundwaters, the Applicant must proceed to a Tier 3 Assessment. 						
	Note that an Applicant may be requested to conduct a Tier 3 Assessment where the Licensing Authority, following a risk screening of the discharge, deems that there is a high risk of impact to groundwaters from the discharge.						
Refer to "Guidance on Applying for a Discharge Licence - Groundwaters" for guidance on Carrying out a Tier 1, Tier 2 and Tier 3 Assessment.							

PART IV - Section 4

Checklist for Applicant when applying for a licence to discharge	to Groundwater
Details to be Submitted	'X' Box where included
1. Fully completed, signed and dated application form (One original	
plus one three hard copies of all associated documentation must	
be included).	
2. Name & address of Applicant & Agent	
3. Has the type of discharge been identified i.e. new or existing / domestic or trade?	
4. Has location of discharge been identified on a location map?	
5. Newspaper Notice (copy of full page from the newspaper)	
6. Application fee (€380.00).	
7. Site location map at scale 1:50,000	
8. Site layout map at scale of 1:2500	
9. Drainage system drawings at scale no greater than 1:2500	
10. Description of process giving rise to trade effluent	
11. Description of the proposed method of effluent treatment	
including details of percolation area (including measures for the	
control of FOG where appropriate)	
12. Treatment system process drawings	
13. Treatment system operation & maintenance details	
14. Effluent quality, discharge load details and concentration	
15. Receiving water quality assessment (physico-chemical &	
microbial)	
16. Hydraulic loading calculations	
17. Site investigation results including soil and subsoil	
characterisation, trial hole and percolation testing.	
18. Details of designated areas (including designation of waters)	
19. Proposals for dealing with sludge (where relevant)	
20. Emergency procedures in case of plant breakdown or pollution	
incident (including details of storage facilities onsite).	
21. Results of Tier1/Tier2/Tier3 assessment as appropriate	

Please include any additional information which you deem to be pertinent to the application $\!\!\!/$ discharge.

Substance	EC Number	Nature of Use	Amount Stored (tonnes)	Annual Usage (tonnes)	Danger Classification	Risk Phrase	Safety Phrase
							

Ref. European Communities (Classification, Packaging, Labelling and Notification of Dangerous Substances) Regulations, 1994

Appendix B - Off-site Waste Disposal							
Waste Description	EWC. Catalogue No.	Quantity (Tonnes per annum)	Name of site accepting waste	Reference Number of site environment licence	State whether recycling, recovery or disposal		
					-		

Appendix C - Characteristics of Trade and/or Domestic Effluent The following list of parameters is indicative only. Additional physical, chemical or other characteristics as are pertinent to the effluent in question should also be identified. Complete for all applicable sections, giving concentration ranges where available. Emission Point co-ordinates (One table per emission point): Parameter Prior to Treatment (if any) As discharged Concentrations in mg/l unless otherwise stated Characteristic *Note:* Section A = to be completed where discharging Max. domestic effluent only Max. Hourly Max. Daily Max. Daily Mg/lMg/l% Removal **Hourly** Section A-E = to be completed where discharging a trade effluent. Temperature °C рН Biological Oxygen Demand (5 day) Chemical Oxygen Demand Suspended Solids Total Ammonia (as N) Nitrate (as N) Total Phosphorus (as P) Conductivity Molybdate Reactive Phosphorus (MRP) Oils. Fats and Greases Sulphates (as SO₄) Chlorides (as Cl) Phenols (as C₆H₅OH) Detergents (as Lauryl Sulphate) Escherichia coli (E.coli) number/100 ml Total Coliforms number/100 ml Cryptosproridium number/100 ml

В	Metals μg/l				
	Arsenic			 	
	Chromium			 	
	Copper			 	
	Cyanide			 	
	Fluoride			 	
	Iron			 	
	Lead			 	
	Magnesium				
	Manganese				
	Nickel			 	
	Zinc			 	
	Other (please specify)				
C	Pesticides & Solvents:			 	
	Atrazine			 	
	Dichloromethane μg/l			 	
	Simazine μg/l			 	
	Toluene μg/l			 	
	Xylenes μg/l				
D	Organohalogen Compounds (Specify)				
	Organophosphorus Compounds (Specify)			 	
	Organotin Compounds (Specify)				
	Mineral Oils or Hydrocarbons of petroleum				
	origin			 	
	Other toxic substances (Specify)			 	
	Colour (degrees hazen)				
E	Other:				
	Other relevant characteristics including fish		T	 	
	toxicity data from tests carried out on all or				
	part of the effluent				

Appendix D - Dangerous Substances							
Are any of the following chemicals used in the process or stored on the premises	Yes/No	Are residual chemical process materials or chemical tailings from a process recovered or discharged?					
EDC (1, 2 dichloroethane (C ₂ H ₄ C1 ₂))							
TRI trichloroethylene (C ₂ HC1 ₃);							
PER perchloroethylene (C ₂ C1 ₄);							
TCB trichlorobenzene							
Carbon tetrachloride, DDT and pentachlorophenol Aldrin, dieldrin, isodrin, HCB (hexachlorobenzene), HCBD							
(hexachlorobutadiene) and CHCl ₃ (chloroform)							
Cadmium							
>100 kg of raw asbestos							
Atrazine							
Dichloromethane							
Simazine							
Toluene							
Tributyltin							
Xylenes							
Arsenic							
Chromium							
Copper							
Cyanide							
Fluoride Lead							
Nickel							
Zinc							
Zinc							